Dear everyone

This week, with the other chief executives of the health arms length bodies, we sent out an update on the next steps in the NHS planning process. Place-based planning is at the heart of the approach and this is widely understood by our partners in local government. There are different views about what footprint should be used and our letter explains that we need the NHS and local government to work together so that the different footprints link together and support the work on producing Sustainability and Transformation Plans (STP). The STPs will map how local partners propose to close the three gaps identified in the NHS Five Year Forward View: financial, quality and, critically, the health and wellbeing gap. We are now working on providing some hopefully helpful tools to help local partners in the NHS and local government to analyse the gap in their area and produce their local prevention plans within the STP framework.

With one in four of us experiencing a mental health problem at some time in our lives, and people living with long-term mental illness dying on average 20 years earlier than the rest of the population, the publication this week of the report from the independent Mental Health Task Force is very welcome. The report outlines a strategic approach to making mental health as important as physical health, as well as making a much needed shift towards prevention of mental illness and suicide. The report is important for the whole public health system and is worth a read. We in PHE will play our full part in making this happen.

Ipsos MORI recently completed PHE’s third annual stakeholder survey, which we published on Wednesday, accompanied by a short video. The survey shows there is increasing confidence in PHE as a credible and evidence-based organisation, underlining our contributions during the last year to Ebola, e-cigarettes, sugar and promoting prevention. It is also encouraging that we had the fourth highest score for any public body Ipsos has studied in the last decade in the confidence our stakeholders have in us. However, there are clear opportunities for us to do more and the results of the survey are being carefully considered. One area for further attention is local government where their positive experience of PHE has dipped in the past year from the consistent high we have previously seen. We think this is in part due to our in-year move from 14 to eight local Centres, in part to the system maturing and their needs of us changing, and in part to the in-year cuts and the sense that there might have been more we could have done to reduce or avert these. This suggests we need to do at least two things better: to re-energise our regular personal contact with local government at a local level, which we know they value, and to accelerate our work on products and services that help on return on investment and value for money and both of these are in hand. As both a national and local organisation we are committed to being the best we can be in everything we do and we are grateful for this feedback. My personal thanks go to those of you who took part in and contributed to the survey.

And finally, our latest Be Clear on Cancer campaign launched on Tuesday, highlighting blood in pee as a key symptom for both bladder and kidney cancers. The six-week campaign, which is being featured in national and regional print and broadcast and digital media, aims to encourage anyone who notices blood in their pee, even if it’s ‘just the once’, to visit their GP and get it checked. More than 17,000 people in England are diagnosed with bladder or kidney cancer every year and around 7,600 people die annually. Blood in pee is a symptom in over half of bladder cancers and almost a fifth of kidney cancers so it is important to be alert to any changes.

With best wishes